PTO/SB/05 (2/98)

Approved for use through 09/30/2000 OMB 0651-0032

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Do	cket No.	PC10891AGPR				
First Named	I Inventor or Applic	ation Identifier	Tessa A. Castleberry, et al			
Title	The Canine Para	Parathyroid Hormone 1 Receptor				
Express Mail Label No.		EL911724	724415US			

(Only for new nonprovisional applications under 37C.F.R §1.53(b)) Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: **Box Patent Application** Washington, DC 20231 See MPEP chapter 600 concerning utility patent application contents. Microfiche Computer Program (Appendix) 6. *Fee Transmittal Form (e.g., PTO/SB/17) 1. (Submit an original, and a duplicate for fee processing) Nucleotide and/or Amino Acid Sequence Submission 7. [Total Pages 2. Specification 30 (if applicable, all necessary) (preferred arrangement set forth below) Computer Readable Copy Descriptive title of the Invention a. Cross References to Related Applications Paper Copy (identical to computer copy) h. Statement Regarding Fed sponsored R&D Statement verifying identity of above copies Reference in Microfiche Appendix c **ACCOMPANYING APPLICATION PARTS** Background of the Invention Brief Summary of the Invention Assignment Papers (cover sheet & document(s)) 8. Brief Description of the Drawings (if filed) Power of Attorney **Detailed Description** 37 C.F.R. §3.73(b) Statement 9. Claim(s) (when there is an assignee) Abstract of the Disclosure English Translation Document (if applicable) 10 Copies of IDS Information Disclosure 11. Drawing(s) (35 U.S.C. 11.3)[Total sheets Statement (IDS)/PTO-1449 Citations Preliminary Amendment Oath or Declaration [Total pages 12. Return Receipt Postcard (MPEP 503) Newly executed (original or copy) 13. (Should be specifically itemized) Copy from a prior application (37 CFR Statement filed in prior application, *Small Entity §1.63(d)) Status still proper and desired (for continuation/divisional with Box 17 completed) Statement(s) (PTO/SB/09-12) [Note Box 5 below] Certified Copy of Priority Document(s) DELETION OF INVENTOR(S) 15. (if foreign priority is claimed) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b). Priority Claim of U.S. Provisional Application Other: Incorporation By Reference (useable if Box 4b is checked) Serial No. 60/229,170 and filed on August 30, The entire disclosure of the prior application, from which a 2000. copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein. *NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28). If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment. of prior application No: Continuation-in-part (CIP) Divisional Continuation Group/Art Unit: Examiner Prior application information: CORRESPONDENCE ADDRESS 18. (Insert Customer No. or Attach bar code label here) Correspondence address below Customer Number or Bar Code Label Name Gregg C. Benson Address Pfizer Inc. Patent Department, MS 4159, Eastern Point Road Address Zip Code 06340 Groton State City 1-(860)-441-5221 1-(860)-441-4901 United States Of America Telephone Country 36,647 Gregory P. Raymer Registration No. (Attorney/Agent) NAME (Print/type) Date Signature

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					Complete if Known									
FEE TRANSMITTAL						Application Number To be assigned								
						Filing Date				Concurrently Herewith				
Patent fees are subject to annual revision on October 1. These are the fees effective October 1,. 2000.					First Named Inventor				Tessa A. Castleberry, et al					
Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.					Examiner Name				To be assigned					
See 37 C.F.R. §§ 1.27 and 1.28.				Group/Art Unit				To be assigned	To be assigned					
Total Amount of Payment (\$)710.00					Attorney	Docke	et No.		PC10891AGPR	PC10891AGPR				
METHOD OF PAYMENT (check one)							FEE CALCULATION (continued)							
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2. EXTRA CLAIM FEES				141	1,240	241	620	Petition to revive - unint	etition to revive - unintentional					
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** or number previously paid, if greater; For Reissues, see below Large Entity Small Entity				123	50	123	50	applications	Petitions related to provisional applications					
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109			Other Fee (specify)				examined (37 CFR 1.129(b))			Ì				
110		10	9	original patent		Other Fee (specify)								
SUBTOTAL (2) (\$) 0						*Reduced	by Bas	sic Filing I	Fee Paid	SUBTOTAL	(3) (\$)	0		
SUBMITTED BY										Complete (if Applicable)				
Type or Printed Name Gregory P. Raymer			I Data				Reg. Number Deposit Account	36,647 16-1445						
Signature Coymen			Date		8/3	30/01	User ID	10-1445						